

C

ENTRY BLANK

PLEASE TYPE OR PRINT

Entered previous May Show

☒ yes ☐ no

☐ Ms.

☒ Mr. Artist

BRUCE CLINE

(Last Name Last)

Permanent
Address

3760 MAYFIELD RD. CLEVEL. 475

Street

City

44121

Zip

Tel. (416) 382-2422

Area Code

Temporary or
Studio Address

Street

City

Tel. () 241-1486

Zip

Area Code

If you do not presently live in one of the counties of the
Western Reserve, which county were you born in? _____

Collaborator _____

(If Any)

If May Show entries are not accepted or not sold:

☒ Artist will pick up at Museum.

☐ Museum should dispose of.

☐ Museum should ship to artist C.O.D. at this address:

Special Instructions

When necessary include below instructions or a drawing of how
the object is to be assembled and displayed.

✓
This entry blank must be fully made out and signed. Unsigned
entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is
understood that the Museum will have the right to dispose for
its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on
exhibition until June 4, 1978.

The submission of objects will be construed as acceptance of all
conditions printed in the entry information.

Signature

Bruce Cline

ENTRY BLANKS

1

- ☐ 1. Paintings
 ☒ 2. Graphics
 ☐ 3. Photography
☐ 4. Sculpture
 ☐ 5. Electric
 ☐ 6. Crafts

Materials

PHOTO SILK SCREEN

Title

UNTITLED

Price or NFS

Insurance Value
if NFS Only

Size

~~\$50.~~
\$50.

9" x 12"

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No.
For Sale

Total No. in Edition

Price
Unframed

Price of
Frame

109

10

\$40.00

~~\$10.~~
\$10.

ACCEPTED

DO NOT WRITE IN THIS SECTION

ACCEPTED

X

X

REJECTED

29(2)

REJECTED

2

- ☐ 1. Paintings
 ☐ 2. Graphics
 ☐ 3. Photography
☐ 4. Sculpture
 ☐ 5. Electric
 ☐ 6. Crafts

Materials

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Insurance Value
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Size

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Unframed

Price of
Frame

ACCEPTED

DO NOT WRITE IN
THIS SECTION

ACCEPTED

RECEIVED

REJECTED

REJECTED

DATE